DENTAL BOARD OF CALIFORNIA

INITIAL STATEMENT OF REASONS

Hearing Date: May 14, 2004

<u>Subject Matter of Proposed Regulations</u>: Modification, reorganization, and amendments to the Infection Control Guidelines for dental offices.

Section Affected: 1005

Specific Purpose of each adoption, amendment, or repeal:

These proposed regulations reflect a modernization of language pertaining to Infection Control standards based on nationally recognized science in the subject area. A reorganization of the existing language coupled with amendments to reflect new science was required to adequately address the Infection Control guidelines as set forth by the Dental Board of California. The Dental Board is to review these regulations annually.

Definitions:

- (a) (1) Redefine "universal" precautions to be stated as "standard" precautions and to create more consistency with the Center For Disease Control (CDC) Guidelines.
- (a) (5) Redefine low-level disinfection to include some bacteria and fungi.
- (a) (6) Redefine intermediate-level disinfection to include that many human pathogens are also killed.
- (a) (8) Adds and includes the use and care of germicides.
- (a) (9) Adds and includes "sterilization" as a definition.
- (a) (10) Adds and defines "Personal Protective Equipment" that is consistent in today's dental offices.
- (a) (11) Adds and defines, "Other Potentially Infectious Materials" (OPIM) to create more consistency with CDC Guidelines.
- (b) Division of Occupational Safety and Health (Cal-DOSH) is added to reflect a more accurate name for what used to be OSHA.
- (c) This section is added to define the requirements of each dental office in relation to standard precautions of all patients, written protocols, and copies of this regulation posted in each office.

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Personal Protective Equipment:

- (3) Redefines how surgical facemasks are worn.
- (4) This section is included to define how protective attire is to be changed in relation to patient care activities, i.e.; gowns are to be changed if soiled, etc.

Hand Hygiene:

- (5) This section is added to include hand hygiene for the health care worker in relation to patient care activities.
- (6) Defines dermatitis of the "hand" in relation to refraining from direct patient care and the handling of patient care equipment.

Gloves:

- (7) This section is added to include the use of gloves in the healthcare setting.
- (8) Removes Cal-EPA and inserts "FDA" to create more consistency with CDC Guidelines.
- (9) This section is added to define how critical and semi-critical instruments are to be sterilized.
- (10) This section is added to define what hand-pieces shall be sterilized between patients.
- (11) This section is added to define what single-use instruments will be used for one patient only and discarded.
- (12) This section is added to define the discard procedure for needles.

Irrigation:

(13) This section is added to define how sterile coolants/irrigants are used in a sterile delivery system.

Sterilization:

(14) This section is added to define sterilization cycles, such as spore testing.

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Facilities:

- (15) This section reflects how contaminated surfaces, or items are to be cleaned.
- (16) This section defines what level of disinfectant is to be used on the clinical contact surfaces.
- (17) This section is added to define how often dental water units are to be purged or flushed with water.
- (18) This section is added to define how solid waste is to be disposed of.

Lab Areas:

- (19) This section defines how splash shields and equipment guards are used on dental laboratory lathes.
- (20) This section is added to define how intraoral items are to be cleaned and disinfected before prior to placement in patient's mouth.

Factual Basis:

Beginning in February 2001, and annually thereafter, the Board appointed an Ad Hoc Committee on "Infection Control" to assist staff in developing recommendations on revisions to the Infection Control guidelines. The committee has held 5 meetings and reviewed the regulations for clarity of language, necessity for the amendments, and consistency with other governing agencies such as Cal-OSHA, Cal-EPA, and the Center for Disease Control (CDC).

Existing law authorizes the Board to review and, if necessary, adopt new regulations annually to ensure minimum standards for infection control are adequately addressing patient safety needs.

Underlying Data

CDC Guidelines for Environmental Infection Control, Dental Health Care Facilities, June 6, 2003 (Draft versions), 12/03 (Final version)
Cal-OSHA Bloodborne Pathogens Standards (2001 version)
Ad Hoc Committee Meeting Minutes of October 10, 2002
Ad Hoc Committee Meeting Minutes of July 9, 2003

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Ad Hoc Committee Meeting Minutes of October 7, 2003 Department of Pesticide Regulation, letter dated July 23, 2003 Department of Pesticide Regulation, letter dated August 13, 2003

Business Impact:

This regulation will not have a significant adverse economic impact on businesses.

Specific Technologies or Equipment

This regulation does not mandate the use of specific technologies or equipment.

Consideration of Alternatives

No reasonable alternative which was considered or that has otherwise been identified and brought to the attention of the Dental Board of California would be either more effective in carrying out the purpose for which the action is proposed or would be as effective and less burdensome to affected private persons than the proposed regulation.